

FORMS TO BE COMPLETED BY PRISONERS FILING A CIVIL RIGHTS  
COMPLAINT UNDER 42 U.S.C. § 1983 or 28 U.S.C. § 1331

RECEIVED  
SCRANTON

COVER SHEET

JAN 5 2001

THIS COVER SHEET CONTAINS IMPORTANT INFORMATION ABOUT FILING A COMPLAINT AND YOUR OBLIGATIONS IF YOU DO FILE A COMPLAINT. ~~PLEASE READ AND COMPLETE THE COVER SHEET BEFORE YOU PROCEED FURTHER.~~

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The cost for filing a civil rights complaint is \$150.00.

If you do not have sufficient funds to pay the full filing fee of \$150.00 you need permission to proceed *in forma pauperis*. However, the court will assess and, when funds exist, immediately collect an initial partial filing fee of 20 percent of the greater of:

- 1) the average monthly deposits to your prison account for the past six months; or
- 2) the average monthly balance in your prison account for the past six months.

Thereafter, the institution in which you are incarcerated will be required to make monthly payments of 20% of the preceding month's deposits credited to your account until the entire filing fee is paid.

**CAUTION: YOUR OBLIGATION TO PAY THE FULL FILING FEE WILL CONTINUE REGARDLESS OF THE OUTCOME OF YOUR CASE, EVEN IF YOUR COMPLAINT IS DISMISSED BEFORE THE DEFENDANTS ARE SERVED.**

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1. You shall file a complaint by completing and signing the attached complaint form and mailing it to the Clerk of Court along with the full filing fee of \$150.00. (In the event attachments are needed to complete the allegations in the complaint, no more than three (3) pages of attachments will be allowed.) If you submit the full filing fee along with the complaint, you **DO NOT** have to complete the rest of the forms in this packet. Check here if you are submitting the filing fee with the complaint form. \_\_\_\_\_

2. If you cannot afford to pay the fee, you may file a complaint under 28 U.S.C. § 1915 without paying the full filing fee at this time by completing the following: (1) Complaint Form; (2) Application To Proceed In Forma Pauperis; and (3) Authorization Form. You must properly complete, sign and submit all three standard forms or your complaint may be returned to you by the Clerk of Court. Check here if you are filing your complaint under 28 U.S.C. § 1915 without full prepayment of fees. ☒

**Please Note:** If your case is allowed to proceed and you are awarded compensatory damages against a correctional facility or an official or agent of a correctional facility, the damage award will first be used to satisfy any outstanding restitution orders pending. Before payment of any compensatory damages, reasonable attempts will be made to notify the victims of the crime for which you were convicted concerning payment of such damages. The restitution orders must be fully paid before any part of the award goes to you.

**DO NOT DETACH THE COVER SHEET FROM THE REST OF THE FORMS**

## FORM TO BE USED BY A PRISONER IN FILING A CIVIL RIGHTS COMPLAINT

IN THE UNITED STATES DISTRICT COURT  
FOR THE MIDDLE DISTRICT OF PENNSYLVANIA0041623  
(Inmate Number)Peter Holmes  
(Name of Plaintiff)277 W Third St  
(Address of Plaintiff)Williamsport PA 17701

vs.

DAVID DESMOND  
KEVIN DEPARLOS  
TIM MAHONEY  
(Names of Defendants)1:01-CV-135  
(Case Number)

## COMPLAINT

FILED  
HARRISBURG, PA  
SCR  
JAN 22 2001MARY E. D'ANDREA CLERK  
POTTO BE FILED UNDER: 42 U.S.C. § 1983 - STATE OFFICIALS☒ 28 U.S.C. § 1331 - FEDERAL OFFICIALS

## I. Previous Lawsuits

- A. If you have filed any other lawsuits in federal court while a prisoner please list the case and case number including year, as well as the name of the judicial officer to whom assigned:
- 
- 
- 
- 

## II. Exhaustion of Administrative Remedies

- A. Is there a grievance procedure available at your institution?
- 
- Yes
- ☒
- No

- B. Have you filed a grievance concerning the facts relating to this complaint?
- 
- ☒
- Yes
- No

If your answer is no, explain why not  
  

- C. Is the grievance process completed?
- Yes
- ☒
- No

## III. Defendants

(In Item A below, place the full name of the defendant in the first blank, his/her official position in the second blank, and his/her place of employment in the third blank. Use Item B for the names, positions and places of employment of any additional defendants.)

- A. Defendant DAVID Desmond is employed as warden at Wyoming county Prison
- B. Additional defendants Kiven DE CARLOS and Tim Mahoney

IV. Statement of Claim 12-4-00 - 8:00 AM

(State here as briefly as possible the facts of your case. Describe how each defendant is involved including dates and places. Do not give any legal arguments or cite any cases or statutes. Attach extra sheets if necessary.)

1. at the above time and date I Peter Holmes was very sick and ill the next day I was force to go to work at a land feild were I was not suppose to be.
2. I was told to work with a Bad Back and Neck and I was very sick at the time. I did not go to this, <sup>po</sup> got to Sick so I was put in disciplinary Action
3. The Jail is making Inmate work with out haven a work permit This is Not Right I am still told I must work with a Bad Back " Neck

## V. Relief

(State briefly exactly what you want the court to do for you. Make no legal arguments. Cite cases or statutes.)

1. I want the proper medical Attention  
deal with Inmates and There medical need  
I want compensatory damages in excess of  
\$500,000 to plaintiff for deliberate indifference
2. punitive damages in excess \$500,000 for cruel  
and unusual punishment without due process of  
law and willfully ignoring plaintiff request  
medical care That resulted in Back and Neck  
damage
3. I am going through alot of mental depression  
concerning the future of my Neck and  
Back. I want them to be responsible for my  
medical condition and suffering, mentally  
and phsyically

Signed this 28 day of December, 2000

Peter Holmes  
(Signature of Plaintiff)

I declare under penalty of perjury that the foregoing is true and correct.

12/28/00  
(Date)

Peter Holmes  
(Signature of Plaintiff)